

TEFAP CIVIL RIGHTS COMPLIANCE REVIEW

Agency Name: _____

Address: _____

Phone Number: _____

Type of Facility: Emergency Feeding Organization (EFO): ____ EFO Site: ____

Food Bank: ____ Congregate Feeding: ____ Pantry: ____

Name and Title of Person(s) Interviewed: _____

Reviewer(s): _____

Date of Review: _____

Contract Number: _____

Is service provided to all regardless of race, color, national origin, sex, disability, or age?

Yes: ____ No: ____

Comments: _____

What criteria are used in selecting applicants for the program? _____

Applicable for EFO Site, Congregate Feeding, or Pantry Review Only: Are all participants treated the same regardless of race, color, national origin, sex, disability, or age:

A. In the distribution or serving waiting area? Yes: ____ No: ____ N/A: ____

Comments: _____

B. In the distribution or serving line? Yes: ____ No: ____ N/A: ____

Comments: _____

Is the nondiscrimination statement in the following Program materials:

1. Household eligibility applications? Yes: ____ No: ____
2. Distribution records (required only for agencies not utilizing applications)? Yes: ____ No: ____
3. Public releases concerning Program? Yes: ____ No: ____
4. Announcements of distributions? Yes: ____ No: ____
5. Flyers, posters, or other publications? Yes: ____ No: ____

Is the "...And Justice for All" poster in a prominent place within the facility? Yes: ____ No: ____

If there is a significant population which does not speak English, are Program informational materials/public announcements provided in appropriate translation? Yes: ____ No: ____ N/A: ____

Is there a system for handling complaints? _____ If "YES", describe:

Have any discrimination complaints been received? _____ If "YES", describe action taken:

In the opinion of the reviewer, is the racial/ethnic composition of the staff conducive to minority participation? YES: ____ NO: ____

In the opinion of the reviewer, based on information contained in this review and personal observation, does the facility appear to be in compliance with Title VI of the Civil Rights Act of 1964? YES: ____ NO: ____

If "NO", indicate on a separate sheet:

- A. Areas of possible noncompliance.
- B. Recommendations for corrective action and follow-up.

REMARKS:
